

## CHAPTER XI: Overview of NCCAM

### Quirky Ideas From Outside the Mainstream

I've collected a few ideas that attracted intense resistance from the medical profession as a reminder to my colleagues, that we don't always get it right. Here's one that's interesting: Pilates, which you are probably familiar with, because you see the machines in gyms, actually began in the period around the end of WWI by a German physical therapist (or physiatrist as he called himself), who developed a whole approach to care of war injuries of resistance training in bed. And that was an era when physicians believed strongly that the way to get better from illnesses was to be very still and lie in bed and not move. And the pilates interventions are now widely incorporated into physical therapy and the resistance, I think, has faded.

Here's another one. Lamaze techniques, which are now very much a routine part of preparation for a prepared childbirth were also seen by obstetricians as very problematic and not welcome when these ideas were first developed. And this one actually, I wasn't away of until I dug into this history. Edwina Froehlich was a mother who was, in the 50s, discouraged by her pediatrician for breastfeeding and told that formula feeding was much better. And she founded some groups of women with a whole different idea of motherhood, and pushed the idea of helping mothers learn to breastfeed and the importance of breastfeeding. And now, of course, we all understand the importance of breastfeeding. But through the 60s, most pediatricians believed that formula was better. But, in fact, not only is it better to breastfeed, but women need some support, especially in our smaller families in learning to breastfeed, is also now well accepted. A wife of a person working with us recently had a baby and she was very happy at the lactation counseling she got on the maternity ward. And this is very much an upgrowth of the practices Edwina Froehlich instituted. And another, I think, very classic example of something I've benefited from in my own family, is the notion that hospice care and hospice support that led to the idea of hospice care and hospice support. But the notion of reducing medical interventions and trying to make thoughtful decisions about them in the end-of-life period, these were very controversial ideas when they were introduced by Kubler-Ross and Cicely Saunders. So I think there's some quirky ideas right now out there. Here's just one that meditative practices like mindfulness-based stress reduction, might help with pain management. I could give you a long list. Acupuncture might belong on the list as well. But I think that part of NCCAM's task, really, is to bring rigorous science to ideas that have come from somewhat outside the mainstream. And I think there are a number of very good ideas, but there are, of

course, a lot of excessive claims as well. And this slide is one that I always enjoy. In fact, antioxidants are an interesting and troublesome example. The NIH has funded a large number of major antioxidant studies. Antioxidant supplements have been very disappointing in their ability to modify disease. In spite of the persistent epidemiologic data that tells us that fruits and vegetables are good for us. And maybe it's not the antioxidants. We really don't know. But as you walk through Whole Foods, almost every third packaged item is advertised as benefiting you by antioxidants. So whether that will cheat death, I don't know.